A CASE OF BLOOD EXTRAVA-SATION INTO THE SCLERA FROM INDIRECT VIOLENCE

BY

FREDERIC GRIFFITH, M.D.
NEW YORK

REPRINTED FROM

THE

MEDICAL RECORD

April 1, 1911

WILLIAM WOOD & COMPANY
NEW YORK







A CASE OF BLOOD EXTRAVASATION INTO THE SCLERA FROM INDIRECT VIOLENCE.

By FREDERIC GRIFFITH, M.D.,

NEW YORK.

THE clinical interest in the present report lies in the causation of the condition producing the ruptured vessels. Two days ago the patient, a young female, blonde, about 5 feet 3 inches tall and of 120 pounds weight, came, accompanied by a male companion, and giving the history. Margaret, an English gymnast, aged 23 years, engaged in circuit work with her consort in trapeze team performing. The final trick of the pair may be described as a swivel-spin; the man hanging head downwards supports the woman's body by means of a leather and metal ball-bearing swivel device, held in his teeth and hooked to her waist-belt. Cortmencing to turn with the woman swinging limp her body suddenly becomes rigid and she revolves with a velocity of probably 200 revolutions a minute. This showy feat, the woman claims, did not make her dizzy nor did she ever close her eyes during its continuance after becoming adept. Three days before the visit, after coming off stage, she began to feel pain in the left eye and slight vertigo, but ascribing her condition to "cold" and "weak eyes," paid little heed. Her partner discovered upon inspection the presence of hemorrhage, staining the

lower segment of the left eyeball and continuing into the eyelid. He began the prompt ministration of cold water and hot water applications, and had continued this treatment at frequent intervals night and day up to the time of their call. Continuing their engagements, two performances daily had been given, the woman, aside from slight local discomfort, experiencing no difficulty. Owing to the stationary continuance of the blood discoloration the two called for an opinion as to the advisability of their laying off. Examination shows a bright red blood cloud richly coloring the lower quarter surface area of the eye globe, extending beyond the conjunctival crevice to the eyelid and upwards to the episcleral margin. The skin surface below the lid was edematous, puffed, and stained as after a blow from a fist. The woman's muscles are soft and not prominent, her arteries soft, compressible, pulse normal. Treatment advised after application of weak cocain solution (1-10 per cent.) to the conjunctival sac and study of the case consisted of a simple boric acid wash, and continuation of cold in the form of iced eye-cloths, alternating with hot water fomentations, with calomel purgation. After considering the financial stress involved in throwing up of contract, I advised continuation of work, with elimination of the worst straining features in their performances, and for the future to close her eyes when undertaking the spin. One week later the patient was seen to be progressively better.

238 WEST THIRTY-EIGHTH STREET.